



GRINNELL COLLEGE

PIONEER FUND

In Kind Travel Gifts to the PIONEER FUND AT GRINNELL COLLEGE

Name _____
(please print your preferred title [Dr., Mr., Mrs., Ms., other] and name) *Class year*

Updated Address _____

City, State, Zip _____

Phone, E-mail _____

Joint Recognition I want to share recognition for this gift with my spouse/partner:

(please print spouse's/partner's preferred title and name) *Class year*

Auto Travel 1) Personal vehicle: _____ miles x \$.14 (current rate for charitable deduction) = \$ _____

2) Rental car.

Company name: _____ \$ _____

Gas 1: _____ \$ _____

Gas 2: _____ \$ _____

Gas 3: _____ \$ _____

Air Travel 1) _____ \$ _____

2) _____ \$ _____

Other Travel 1) _____ \$ _____

2) _____ \$ _____

Additional Expenses *Company and Purpose (parking, shuttle, road toll, ferry toll)*

1) _____ \$ _____

2) _____ \$ _____

Total: \$ _____

Gift Details Original receipts attached. *(Must be included for Gifts in Kind.)*

Event/Purpose _____ *Date*

Department/Office _____

Contact person _____

Signature _____

Office of College
and Alumni Relations
Grinnell College
Grinnell, Iowa 50112-1690

866-850-1846
641-269-3200
fax 641-269-3222

www.grinnell.edu

* In Kind Travel Gifts are Pioneer Fund gifts that must be accounted for with the annual budget of the office with which you are working. Your receipt will say "Travel Expenses" and the sum of your gift will be included in your total gift to the College as acknowledged in the *Honor Roll of Giving*.

Must be submitted by mail to include original receipts.